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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/451,520 03/03/2003  
 and claims benefit of 60/529,539 12/15/2003 *None jo*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None jo*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials	STATE OR COUNTRY WI	SHEETS DRAWING 5	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 3
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 26710  
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TITLE  
 Roller cradle and modular conveying assembly formed therefrom

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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